PETI	TION FOR EXTENSION OF TIME UNDER	Docket Number (Optional)		
FY 2008			021863-000100US	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 10/660,950			Filed September 11, 2003	
	TECHNIQUES FOR PROCESSING ELECTRO	NIC FORMS		·
Art Ur	nit 2176	Examiner Maikhanh Nguyen		
	s a request under the provisions of 37 CFR 1.1			
	ation.	30(a) to exterio the per	log for filling a reply in	the above identified
The re	equested extension and fee are as follows (che	eck time period desired	and enter the approp	riate fee below):
		<u>Fee</u>	Small Entity Fee	!
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
	Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$
	Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$_525
	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$
	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$
X	Applicant claims small entity status. See 37 CFR 1.27.			
	A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
	The Director has already been authorized to charge fees in this application to a Deposit Account.			
$\boxtimes$	The Director is hereby authorized to charge a Deposit Account Number	ny fees which may be r	equired, or credit any	overpayment, to
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 43,336  attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
				-
	/Sujit B. Kotwal/		July 23, 2008	
_	Signature		Date	
_	Sujit B. Kotwal, Reg. No. 43,3	336	650-326-2400	
Typed or printed name			Telephone Number	
	Signatures of all the inventors or assignees of record of the nature is required, see below.	entire interest or their represe	entative(s) are required. Su	bmit multiple forms if more tha
<b>X</b> 1	Total of 1 forms a	re submitted.		